

# State of New Hampshire



## Board of Barbering, Cosmetology, and Esthetics 2 Industrial Park Drive Concord NH 03301 271-3608

YOU MUST ENCLOSE THE FOLLOWING:

- Questionnaire for owner and manager;
- Application fee of \$50.00 for each shop license checked below. Make check or money order payable to: Treasurer, State of New Hampshire;
- If this is a change of owner, you must provide proof of ownership.

If you are going to offer tanning you must register as a Tanning Facility. You can obtain the application on our web page at [www.nh.gov/cosmet](http://www.nh.gov/cosmet) Information on required shop equipment/requirements can be found on web page under Administrative Rules Bar 302.02-302.08

APPLICATION FOR REGISTRATION OF: **(CHECK THE NECESSARY LICENSURES)**

( ) COSMETOLOGY SHOP ( ) BARBER SHOP ( ) MANICURING SHOP ( ) ESTHETICS SHOP

NEW SHOP: \_\_\_\_\_ CHANGE OF OWNER: \_\_\_\_\_ RELOCATION: \_\_\_\_\_ TO DUAL LICENSE: \_\_\_\_\_

ARE YOU A CURRENT BOOTH RENTER?: YES \_\_\_\_\_ NO \_\_\_\_\_ IF YES, ARE YOU GOING TO KEEP THIS BOOTH RENTAL: YES \_\_\_\_\_ NO \_\_\_\_\_

IF RELOCATION OLD ADDRESS: \_\_\_\_\_

IF SHOP NAME CHANGES OLD NAME: \_\_\_\_\_

NAME OF SHOP: \_\_\_\_\_

NAME OF SHOP OWNER: \_\_\_\_\_

(Mailing) ADDRESS OF SHOP: \_\_\_\_\_

\_\_\_\_\_

(Physical) ADDRESS OF SHOP: \_\_\_\_\_

\_\_\_\_\_

TELEPHONE OF SHOP: \_\_\_\_\_ CELL PHONE # \_\_\_\_\_ HOME PHONE # \_\_\_\_\_

SHOP OWNERS SSN: \_\_\_\_\_ SHOP OWNERS BIRTH MONTH \_\_\_\_\_

MANAGER NAME: \_\_\_\_\_ MANAGER/OR OWNER LICENSE # \_\_\_\_\_

MANAGER SIGNATURE: \_\_\_\_\_ Date \_\_\_\_\_

SHOP OWNER SIGNATURE: \_\_\_\_\_ Date \_\_\_\_\_

# State of New Hampshire



**Board of Barbering, Cosmetology, and Esthetics  
2 Industrial Park Drive  
Concord NH 03301  
271-3608**

Dear Applicant:

Please be advised that it is your responsibility to be in compliance with all laws and rules of the Board of Barbering, Cosmetology, and Esthetics.

Upon request the Board will provide the licensee with laws governing the practice of Barbering, Cosmetology, and Esthetics and the administrative rules. You must be in compliance with all laws and rules of the Board, along with any other State requirements, and your city or town in which your shop is located.

The discharge of salon wastewater to a septic system is regulated by the Department of Environmental Services (DES) under the New Hampshire Code of Administrative Rules Env-Ws 1500, Groundwater Discharge Permit and Registration Rules. For additional information please contact Mitchell Locker at (603) 271-2858.

I \_\_\_\_\_ certify that I have read all laws governing barbering, cosmetology, and esthetics and the administrative rules of the Board. I believe my shop to be in compliance with all of them. I will have the certificate of occupancy or a letter from the town stating I am in compliance and that a certificate is not required prior to my opening. I understand that my shop cannot open until the certificate of occupancy or letter has been received, and the Board's inspector has given me approval. I further state that I will repay the fee if I am not at the shop when the inspector arrives to conduct the inspection or if my shop is not in compliance.

Signature\_\_\_\_\_

Date\_\_\_\_\_

**NH STATE BOARD OF BARBERING,  
COSMETOLOGY, AND ESTHETICS  
2 INDUSTRIAL PARK DRIVE  
CONCORD NH 03301  
603 271-3608 Phone  
603 271-8889 Fax**

**QUESTIONNAIRE FOR APPLICANTS and LICENSEES**

- **This questionnaire must be completed using blue or black ink, signed, and sent to the NH Board of Barbering, Cosmetology, and Esthetics at the above address with your application for licensure or renewal. The NH Board of Barbering, Cosmetology, and Esthetics will issue no application, license, renewal, or work permit without this form being completed. (If additional space is required for explanation use other side.)**

1. Have you ever been convicted of any felony or misdemeanor, other than a traffic violation, which has not been annulled by a court? (Circle one) YES NO

**If yes, Before the Board can review your file for approval they must have the following documents:** You must obtain from the Court(s) a copy of the court charge(s), conviction(s), penalties imposed, and provide a statement from you relative to the charge(s); and

If you are currently on probation you must provide all the above plus the following: You must provide your probation officers name, mailing address, and telephone number if applicable; and You must obtain a letter from your probation officer stating you are in compliance with your probation. If you were on probation/parole and have completed all requirements we need a letter indicating you have met all requirements and are no longer on probation or parole.

If you have already submitted the above to the Board, in a prior application, and the Board approved the conviction(s) you must state the conviction, the date of the conviction, and the date the Board approved this conviction:

2. Are you addicted to the use of alcohol or other habit-forming drugs to a degree rendering you unfit to practice under RSA 313-A (Circle one) YES NO If yes explain:
3. Have you been determined by a court to be mentally incompetent or do you have, or have you been told by health practitioner or mental health practitioner that you have, a physical or a mental condition that impairs your ability to practice the profession for which you are seeking licensing under RSA 313-A? (Circle one) YES NO If yes, Explain:

**I hereby certify that the statements made in this application are true and accurate. I have not withheld information that is requested. I am aware that a false, dishonest or misleading answer may be grounds for 1) denial of this application; 2) disciplinary action against my license; and further that 3) false statements are punishable by law.**

Applicant Signature: \_\_\_\_\_

Applicant Name (Please Print): \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_ Social Security No. \_\_\_\_\_

**Board of Barbering, Cosmetology, and Esthetics  
2 Industrial Park Drive  
Concord NH 03301  
271-3608**

Dear Applicant:

The New Hampshire Board of Barbering, Cosmetology, and Esthetics request the following for a shop or booth rental license. Please ensure you have completed and included all the information requested below or your application will be denied and returned to you.

\_\_\_\_\_ Application completed and signed.

\_\_\_\_\_ If there are multiple owners a separate application for each owner must be completed with all necessary forms.

\_\_\_\_\_ Questionnaire for owner and/or manager;

\_\_\_\_\_ If this is a change of owner, must provide proof of ownership (bill of sale);

\_\_\_\_\_ Application fee of \$50.00 for each type of license checked;

\_\_\_\_\_ Certificate of Occupancy or a letter from the town stating you are in compliance (If you do not have this to send with the application you must fax the CO to the office before the inspector can make an appointment with you)

Once the Board has received all the necessary information an inspector will contact you to set up an appointment. Please make sure you file all the necessary paperwork at least two weeks in advance. You cannot operate until an inspection has occurred and you have been approved for licensure. If you have any questions, please do not hesitate to contact the office.